


UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. 2189-P03242US00	
		First Named Inventor SCOTT, Wesley	
		Title	SYSTEM AND METHOD FOR BENDING STRIP MATERIAL TO CREATE CUTTING DIES
		Express Mail Label No.	EV 327965109 US
		Date Mailed: July 9, 2003	
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i>	
2. <input checked="" type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27		8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>	
3. <input checked="" type="checkbox"/> Specification (Total Pages [22]) <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure 		a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on <input type="checkbox"/> CD-ROM or CD-R (2 copies); or <input type="checkbox"/> paper c. <input type="checkbox"/> Statement verifying identity of above copies	
4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) (Total Sheets [19])		ACCOMPANYING APPLICATION PARTS	
5. <input type="checkbox"/> Oath or Declaration (Total Pages []) <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 			
6. <input type="checkbox"/> Application Data Sheet See 37 CFR 1.76			

16591 U.S. PTO
 10/615704
 07/09/03

CORRESPONDENCE ADDRESS

Please address all correspondence to **Customer Number 000110** to the attention of the individual identified below.


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07/09/03



FEE TRANSMITTAL

Complete if known

Application Number: Filed Herewith

Filing Date: July 9, 2003

First Named Inventor: SCOTT

Group Art Unit:

Examiner Name:

Total Amt. of Payment: (1)+(2)+(3)= **\$474**

Attorney Docket Number: 2189-P03242US00

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to:

- ☐ Charge indicated fees
- ☒ Charge additional fees
- ☒ Credit overpayments

to the account of DANN, DORFMAN, HERRELL & SKILLMAN
Deposit Account Number 04-1406

2. Payment enclosed:

Check in the amount of \$474

FEE CALCULATION

1. FILING FEE

Fee

Fee Description

Utility filing fee	<u>375</u>
Design filing fee	<u>0</u>
Plant filing fee	<u>0</u>
Reissue filing fee	<u> </u>

SUBTOTAL (1) \$375

FEE CALCULATION (continued)

ADDITIONAL FEES

Fee Description

Fee Paid

Surcharge-late filing fee or oath	<u> </u>
Surcharge - late provisional filing fee or cover sheet	<u> </u>
Extension for response within first month	<u> </u>
Extension for response within second month	<u> </u>
Extension for response within third month	<u> </u>
Extension for response within fourth month	<u> </u>
Notice of Appeal	<u> </u>
Filing a brief in support of an appeal	<u> </u>
Request for oral hearing	<u> </u>
Petition to revive unavoidably abandoned application	<u> </u>
Petition to revive unintentionally abandoned application	<u> </u>
Issue fee	<u> </u>
Petitions to the Commissioner	<u> </u>
Petitions related to provisional applications	<u> </u>
Submission of Information Disclosure Stmt.	<u> </u>
Recording each patent assignment per property	<u>0</u>
Other fee (specify) <u>Advance Order (10 copies)</u>	<u> </u>

SUBTOTAL (3) \$0

2.

		Paid		Extr		Fee
Total Claims	31	-20	=	11	x 9	= 99
Independent Claims	2	-3	=	0	x 42	= 0

Multiple Dependent
(First presentation)

SUBTOTAL (2) \$99

Submitted By:

Typed or

Printed Name Henry H. Skillman

Reg. Number 17,352

Deposit Account User ID

Signature *Henry H. Skillman*

Date July 9, 2003

04-1406